

## STATE OF NEW HAMPSHIRE

### 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

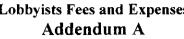
**RECEIVED** 

PLEASE PRINT

I. Name of Lobbyist(s)	Michael	Stibble		JUL 26 2017
II. Name of lobbyist's partn	archin firm or ac	roperation if any		NEW HAMPSHIRE DEPARTMENT OF STATE
Dz. h 17	P into	Center-14		MANUAL OF STATE
(Name of pa	tnership, firm or cor	poration)	·	
64 N. Mam St, S		Concord	nH	03301
Business Address: (Street)	1.07	(Town/City)	(State)	(Zip Code)
(03) <u>228-1432</u> (Telephone)	(W)	335-2677 (Fax)	e-mail Milles	edraniong
III. This statement covers: (				ile a separate report for
reportable expense transacti	ions which are no	t attributable to any one	client).	
☐ All reportable transactions	occurring in the n	nonths prior to the reporti	ng date relative to the fo	ollowing client:
(Full N	lame of Client as it a	ppears on the Lobbyist Regi	stration Form)	
All reportable transactions unrelated to any particular clie		cluding the lobbyist's fan	nily), or the lobbying fir	m listed below which are
IV. Date of Report April	26, 2017	Ji	uly 26, 2017 🛂	
	date of registration i		from 4/1/17 to 6/30/17	
	ber 25, 2017 From 7/1/17 to 9/30/1		anuary 31, 2018 [] from 10/1/17 to 12/31/17	
V. There have been no fee If this box is checked, complet Concord, NH 03301.				
VI. Check if additional repo	rts are attached:			
If you have received fees	or made expenditu	res, you must file Adden	dum A – Fees and Expen	nses
If you have paid an honors Expense Reimbursement	arium or reimburse	ed expenses, you must file	e Addendum B- Report	of Honorariums or
If you, your firm, or your	family has made po	olitical contributions, you	must file Addendum (	C-Political Contributions
Sworn Statement/Affirmation have read RSA 15, RSA 15-Ind complete to the best of my	B, RSA 14-C and R		or or affirm that the fore	-
(Signature of lobbyist)		<del></del>	(Date)	<del></del>
(Print Name of lobbyist)				

## STATE OF NEW HAMPSHIRE

# **Lobbyists Fees and Expenses**



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Michael Skibbie	
II. Name of lobbyist's partnership, firm or corporation, if any:  DSability ZiSHS Center  (Name of partnership, firth or corporation)	-h1+
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The grareduced by any expenses:	t relations, or public relations service oss fee amount reported shall not b
a) Total of all fees received in this reporting period	a) \$ 921272
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	
c) Total of all fees received to date (Add lines a and b)	c)\$ 10402.78
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reportance purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm aggregate total of all expenses paixpenses; (b) the aggregate total of a de: meals purchased during a business than \$10 that is given to the person of with a value of \$25.00 or less); an orting period of greater than \$25.00 for the of greater than \$25, purchase of the trans \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$
f) Total of all expenses year to date	f)\$50
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this repo
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinitive and complete to the best of my knowledge and belief.	rm that the foregoing inform
mh M	7/25/
(Signature of lobbyist)	(Date)